KWCFC - A009 **REVISED 2-2009** COMMONWEALTH OF KENTUCKY

KENTUCKY WORKERS' COMPENSATION **INSURANCE COMPANY** QUARTERLY PREMIUMS REPORT

Original Filing
Revised Filing

(KRS 342.122)

Name of Company		Report for : — Qtr — Year				
Address (Number Ct	reat Doct Office Doy)	New Address	* Federal Employer's ID Number (FEIN)	NAIC #	NAIC GROUP #	
Address (Number, Street, Post Office Box) New Address		Contact Person (Person Preparing Report)				
			Name:	Title:		
-			-			
City	State	Zip Code	Phone Number: () -			
			Email Address:			
* Mandatory Fig	eld for proper Credit					

Mandatory Field for proper Credit

Please complete report in accordance with instructions. Report and payment must be received in the office of the Funding Commission, or postmarked by the United States Postal Service no later than 30 days following the end of the calendar quarter reporting period. Related companies must submit separate reports and checks. Make check payable to and mail report and check to:

> **Kentucky Workers' Compensation Funding Commission** #42 Millcreek Park, P.O. Box 1128, Frankfort, Kentucky 40602-1128

		(1) All	Employers Spe	cial Fund Ass	essmen	t
(3) Policy Effective Dates	(4) Net Direct Written Premium Received	(5) Adjustment For Deductible Policies	(6) Assessment - Schedule Ratings (Deductible Policies)	(7) Assessment Premium Base [(4) + (5) ± (6)]	(8) % Rate	(9) All Employers Assessment [(7) x (8)]
On or Before 3-31-1989					23.30%	\$
4-1-1989 through 12-31-1991					16.90%	\$
1-1-1992 through 12-31-1993					11.68%	\$
1-1-1994 through 12-31-1994					12.30%	\$
1-1-1995 through 12-31-1995					9.70%	\$
1-1-1996 through 12-31-1996					9.00%	\$
1-1-1997 through 12-31-1997					9.00%	\$
1-1-1998 through 12-31-1998					9.00%	\$
1-1-1999 through 12-31-1999					9.00%	\$
1-1-2000 through 12-31-2000					9.00%	\$
1-1-2001 through 12-31-2001					9.00%	\$
1-1-2002 through 12-31-2002					11.50%	\$
1-1-2003 through 12-31-2003					11.50%	\$
1-1-2004 through 12-31-2004					11.50%	\$
1-1-2005 through 12-31-2005					9.0%	\$
1-1-2006 through 12-31-2006					6.5%	\$
1-1-2007 through 12-31-2007					6.5%	\$
1-1-2008 through 12-31-2008					6.5%	\$
1-1-2009 through 12-31-2009					6.5%	\$
(16) Total All Employers Assessment					\$	
(17) Total Coal Additional Assessment [from back of form]				\$		
(18) Total Special Fund Assessment Due [(16) + (17)]				\$		
(19) Adjustment From Previous Report [Attach Detailed Explanation]				\$		
	(20) TOT	AL AMOUNT DU	JE [(18) ± (19)] (S	ee Payment Info	Below)	\$

IMPORTANT PAYMENT INFORMATION: In order to properly credit your account, each reporting entity MUST submit a separate check per individual quarterly filing to the amount computed on line 20 above.

The undersigned certifies that this return has been examined and is, to the best of the undersigned's knowledge and belief, a true, correct and complete report made in good faith.

President or Other Authorized Representative	Title	Date

(2) Additional Assessment – Severance or Processing of Coal					of Coal	
(3) Policy Effective Dates	(10) Net Direct Written Premium	(11) Adjustment For Deductible Policies	(12) Adjustment - Schedule Ratings (Deductible Policies)	(13) Assessment Premium Base [(10) + (11) ± (12)]	(14) % Rate	(15) Coal Additional Assessment [(13) x (14)]
On or Before 3-31-1989					40.00%	\$
4-1-1989 through 12-31-1991					47.00%	\$
1-1-1992 through 12-31-1993					47.28%	\$
1-1-1994 through 12-31-1994					48.90%	\$
1-1-1995 through 12-31-1995					25.70%	\$
1-1-1996 through 12-31-1996					24.00%	\$
1-1-1997 through 12-31-1997					3.00%	\$
1-1-1998 through 12-31-1998					1.00%	\$
1-1-1999 through 12-31-1999					1.00%	\$
1-1-2000 through 12-31-2000					1.00%	\$
1-1-2001 through 12-31-2001					1.00%	\$
1-1-2002 through 12-31-2002					1.00%	\$
1-1-2003 through 12-31-2003					1.00%	\$
1-1-2004 through 12-31-2004					.50%	\$
1-1-2005 through 12-31-2005					.50%	\$
1-1-2006 through 12-31-2006					.50%	\$
1-1-2007 through 12-31-2007					.50%	\$
1-1-2008 through 12-31-2008					.00%	\$
1-1-2009 through 12-31-2009					.00%	\$

(17) Total Coal Additional Assessment \$\\$